PTC/SB/06 (12-04
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTQ-875 Effective December 8, 2004										Application or Docked Number 091924274			
APPLICATION AS FILED - PART I (Column 1) (Column 2)								SMALL	EŃTITY	OR	OTH SMAL	OTHER THAN SMALL ENTITY	
<u> </u>	FOR	· NUI	NUMBER FILED			IBER EXIRA		RATE (1)	FEE (I)	7	RATE (S)		
	SIC FEE OFR 1.16(0), (b), 4	r (el)	, tha		, NA		7	NA	150.00	-	N/A	300.00	
	ARCH FEE	(m)	- NA		NA.		7	· NA	\$250	+	N/A	\$500	
32	AMINATION FEI OFR 1.16(4, 6). o	E	. NA .		1 NZA		1	NA	\$100	1	NIA	\$200	
	CFR 1.16(8)		MLINUS	20 -			7	X\$ 25 .		1	X\$50	 	
W	DEPENDENT CL	AMS	e Caurim					X100	 	OR.	X200	·	
AFE	PLICATION SIZE	sheets of \$250 addition	If the specification and drawings exceed 1 sheets of paper, the application size fee of ta \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. S 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s)								7200		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(II)								+180=			+360=	7	
: #	"If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL	·		TOTAL		
	ÀPPI	LICATION AS	AMENC	DED - F	PARTI	f '		-					
(Column 1) (Column 2) (Column 3)								SMALL 6	ידווא	OR	OTHE	R THAN ENTITY	
AMENDMENTA.	81004	CLAIMS REMAINING AFTER AMENDMENT		NUA PREVI	HEST MBER KOUSLY DFQR	PRESENT. EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL	
S	Total par cen sangu	. 14	Minus	-2	D	- /	1 1	X\$ 25 .	1	OR	X\$50 .	FEE (8)	
2	Independent GFCFR LHQ13	2	Minus	•	3	*	lŀ	X100			X200	 - 	
N.	Application Size Fee (37 CFR 1.16(s))									OR		 	
•	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160)							+180= .		OR	+360=		
,								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Column 1)	·	(Cole	umn 2)	(Column 3)							
ENT B	25/07	CLAIMS REMAINING AFTER AMENDMENT	Minus-	HIGH NUM PREVIO PAID	Ber Jusly	PRESENT EXTRA		RATE (\$)	ADM: TICHAL PEE (T)		RATE (5)	AOPA THOMAL ATEE (8)	
S	ar CFR L1000	/X		de	X		L	X\$ 25 .		OR	X\$50 \.	7.	
	DI CIFR LIGAD	W	Minus .	3		78	L	X100		OR I	X200 X		
	Application Size Fee (37 CFR 1.16(s))						F	-/	Z		- :/	· ·	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAM (17 CFR 1.160)						. L	+190=		OR	+360-		
• If the entry in column 1 is less than the entry in column 2, write "O" in column 3.							A	OTAL. DO'L FEE			TOTAL ADD'L FEE		
•••	I the Highest No. The Highest Num	imber Previously (Tiber Previously (Peld For I Peld For I	N THIS E N THIS S	PACE IS	i less than 20, e less than 3, ent	nter 3		annomedate f	· ·	luma d		
		ation is required to polication. Confide									lumn 1.	(and by the	

Auding gathering, property, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments of the semant of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patient of Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS INDRESS. SEND TO: Commissioner for Patients, P.O. Box 1460, Alexandria, VA 22313-1450.